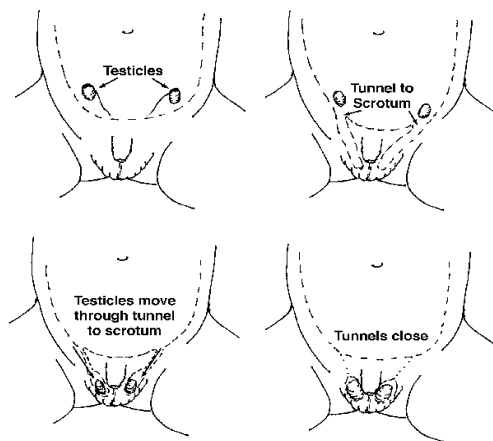


Information for Parents About Hydroceles

Hydrocele is the medical name used to describe a collection of fluid around the testicle in the scrotum (the sac beneath the penis).

What causes a hydrocele?

During pregnancy, the testicles in boy babies actually grow inside the abdominal cavity, not in the scrotum. Four months before birth, a tunnel formed by the smooth lining of the intestinal cavity, pushes down into the scrotum. Between 1 and 2 months before birth, the testicle moves down through this tunnel to be anchored in the scrotum. The tunnel should close after the testicles move through it.



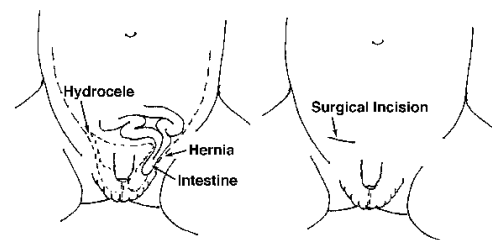
In some boys, the tunnel doesn't completely close. This can cause swelling because the fluid which cushions the intestines can drain into the scrotum. Sometimes the swelling can increase and decrease as a child strains or cries. If the tunnel is large enough to allow the intestines to move down toward the scrotum, the boy has a **hernia**. Hydroceles are more common in boys who are born prematurely. If the hydrocele is small it is usually safe to watch it. Many of them will go away as the boy grows. If the hydrocele is large or if it is still present as a boy gets older it needs to be fixed.

How is a hydrocele treated?

The best treatment for a hydrocele is a surgery to close the tunnel draining into the scrotum. Even when we don't see a hydrocele on the opposite side, 60 out of 100 boys will have an open tunnel on both sides. For that reason we recommend checking both sides at the same time.

How is the surgery done?

An incision is made in the groin. The tunnel is found inside the abdomen and then tied off so that no more fluid can drain to the scrotum. The muscles are tightened to prevent a hernia. The incisions are closed with stitches that dissolve. No stitches have to be removed after surgery.



Is the surgery safe?

Yes! Almost all boys with a hydrocele can have their surgery as an outpatient. This means that the child comes in to the outpatient surgery center in the morning, has the surgery and is ready to go home by early afternoon. This surgery is performed under general anesthesia. Local anesthesia would be terrifying to a child and it also would make the surgery very difficult. Loyola has well-trained pediatric anesthesiologists who have had special training in the care of children. They use continuous oxygen, heart and blood pressure monitoring to make sure that the anesthesia is safe.

Are there any possible complications with the surgery?

As with any medical treatment there are some potential complications with hydrocelectomy. In most cases the standard surgery is 98% successful in closing the hydrocele and having the testicle stay in the proper position. Return of the fluid in the scrotum occurs in about 1/100 boys. Infection and significant bleeding are very rare. It is theoretically possible that the testicle or the tubes going to the testicle could be injured during the surgery. However, this is extremely unlikely.

Is there anything I should watch for?

If your child has a hernia it is possible that the intestines could become trapped and twisted in the tunnel. If this should happen your son would probably have swelling and discoloration in the groin and scrotum. It may turn blue or dark brown or red. He would probably be fussy and would not want to eat. He may vomit or have diarrhea and he may have a fever. This could be a **strangled hernia, an emergency**. If he has swelling in the groin with the color change and any of the other signs listed above call Dr. Hatch or Dr. Lindgren immediately through the hospital operator at 708/216-9000.

How is the surgery scheduled?

If your surgery date wasn't scheduled in the clinic, you should contact our secretary by e-mail at lbauman@luhs.org. She will arrange the surgery date. You may also contact her by telephone at 708/216-6266. After the surgery is scheduled you will receive a phone call from the Outpatient Surgery Office. They will ask you questions about your child's health, medication use and allergies. You will also be given instructions about the time you should arrive on the day of surgery and the time you should stop giving your child food and water.

What special care will my child need on the day of surgery?

In order for the surgery to be safe your child needs to have an empty stomach on the day of surgery. This means that he should have **nothing to eat or drink (including water) for several hours before surgery. Your child should not take ibuprofen (Motrin, Advil, etc.) or aspirin within 7 days of the surgery.** It can increase the risk of bleeding complications. The anesthesia doctor will tell you more about this. If your child has a cold, flu or fevers within one week of the surgery please call my office to reschedule. It would be unsafe to proceed with surgery if your child is ill.

Will my child require special care after surgery?

No dressings are needed following this type of surgery. A small bandage will be placed over the groin incision. Your child will need some pain medication for a few days following surgery. Children's ibuprofen (Motrin, Advil, etc.), Tylenol or some other aspirin free children's pain medication is best. You may also receive a prescription for Tylenol with codeine. Use this for stronger pain. Your son should not have a bath or shower for 48 hours following the surgery. You can give him a sponge bath. If he is in diapers, you should use a warm wet wash cloth rather than diaper wipes for 2 weeks following the surgery. He should avoid any straddling toys, such as a walker or jump seat, or straddling your knee for 2 - 3 weeks after the surgery. He will probably be ready to go back to his regular activities within 5 days of the surgery. If your child is in school, I recommend that he not take gym class for three weeks following the surgery.

Is there anything I can do to prepare my child for surgery?

When a child is old enough to talk there are several things which can help prepare him for surgery. Most children are anxious if they don't know what will happen to them. You can ease this fear by talking about the upcoming surgery. Many local libraries have books about going to the hospital or doctor's office. Some have video tapes on this subject. Children are usually fearful of an unfamiliar environment. It may help to bring a favorite toy or blanket on the day of surgery. Like children, parents also are sometimes anxious about the unknown. Don't hesitate to ask questions. We want you to have all of the information you need about your child's care. It may help to write down questions as you think about them. Bring them to the Outpatient Surgery Center and we will be happy to answer them.

For more information on this topic you are welcome to visit Dr. Hatch's web site: Genitourinary Development

[www.meddean.luc.edu/lumen/meded/urology/guhome.htm]

For more information about Dr. Hatch please visit our web site [www.luhs.org/urology]

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Elmhurst 708/327-7030

Hickory Hills 708/233-5333

Homer Glen 708.645.3400

Oakbrook Terrace 630/953-6600

Wheaton 603.665.5995

Directions and maps available at www.luhs.org

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